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ABSTRACT

This paper chronicles the development of the New Zealand-based Foundation for Alcohol and Drug Education (FADE) and critically reviews this development. FADE's objectives deal with preventing and reducing the use of alcohol and other drugs by young people. FADE chose to operate separately from traditional governmental and nongovernmental alcohol and other drug prevention agencies. Its stated areas of responsibility were: (1) production of educational materials; (2) assistance to schools; (3) communication to the public; (4) development of primary prevention strategies; and (5) documentation of alcohol and other drug use among New Zealand teenagers. This review discusses the significant tensions that arose between FADE and its various constituencies over the course of FADE's development and the consequences of those tensions. FADE provided new approaches to old problems; learning from these approaches can expand the body of knowledge of health education practices. Tensions recognized as creative and dynamic forces can effect change in positive ways. (IAH)

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PRIVATE SECTOR HEALTH EDUCATION IN A SOCIAL WELFARE STATE: A CASE STUDY IN ORGANIZATIONAL TENSION

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PRIVATE SECTOR HEALTH EDUCATION IN A SOCIAL WELFARE STATE: A CASE STUDY IN ORGANIZATIONAL TENSION

This paper chronicles the development of the New Zealand based Foundation for Alcohol and Drug Education (FADE) and critically reviews this development. FADE's objectives deal with preventing and reducing the use of alcohol and other drugs by young people.

This review will describe an organization that chose to operate separately from the traditional government and nongovernment alcohol and other drug prevention agencies. In charting its separate course FADE generated a high public profile, identified alternative sources of financial support, experienced rapid and potentially destructive growth, reorganized and redefined its efforts and ultimately identified a focused role for itself. In the course of this development significant tensions developed between FADE and its various constituencies. It is these tensions that provide the focal point for this study.

Conventional wisdom suggests that tensions of any type are potentially destructive. This case study suggests that the creation of generally unacceptable levels of tension can have useful outcomes. The dynamic nature of tension forces new actions that could not be achieved otherwise.

Tension must be viewed in a long-term context. Tensions between organizations should be recognized for what they are: disagreements on methods or objectives, concerns about doing things differently. Tensions should be recognized as existing first in the minds of those who disagree, rather than those who create the disagreement. They are reactive forces to something proactive.

The Genesis of the Foundation

In 1980 the new deputy-principal of a large coeducational high school disciplined four boys caught for possession of marijuana. The boys were expelled and the school rewrote its alcohol and other drug policy outlining strict procedures for any violations. The media attention surrounding these events was considerable, due, in part, to parental objections to the school's actions. Judicial hearings and public debate drew attention to the issue. Attitudes varied. Counsel for one of the boys argued that since marijuana was so widely used by students it would be inappropriate to discipline these boys caught in possession just because a new administrator had narrowly interpreted the school's responsibilities. The majority of the community supported the school.

For the next four years the school stringently administered its policy. As a result, the school's reputation improved and requests increased from families living outside the school's district to enroll their children.

Partly as a result of his leadership in this area, the deputy-principal, Murray Deaker, was awarded a fellowship for the study of alcohol and other drug prevention programs in Canada, the USA, and the United Kingdom. His report at the end of his study made the following recommendations:

1. All New Zealand intermediate and high schools should have a clear set of alcohol and other drug regulations.
2. Courses on alcohol and other drug education prevention should be included in the health education curriculum at primary, intermediate and secondary school levels.
3. Such courses should be scientifically accurate, using New Zealand teaching resources.
4. Alcohol and other drug prevention courses should influence the values of adolescents and be aimed at creating a decision not to experiment with illegal drugs of any type.
5. School based programs can only be effective if they incorporate parental and community support.
6. A national survey should be conducted to determine the nature and extent of alcohol and other drug use among adolescents.
7. A central agency is needed to plan and coordinate a national effort against the abuse of alcohol and other drugs by young people.

Deaker's report and its recommendations were reported in the press. Several government agencies, who received copies, suggested actions would follow.

After almost a year, frustrated by the absence of any visible action related to the recommendations, Deaker met with a number of prominent Aucklanders and formed FADE. FADE's mission was to:

1. To select, prepare and accumulate written materials with the intention of making this available to parents and teenagers on request.
2. To assist schools to formulate an alcohol and other drug policy.
3. To assist school health programs by providing written material and lesson outlines.
4. To co-ordinate, assist and communicate with the numerous voluntary organizations working in the field.
5. To publicize and communicate to the public the dangers of alcohol and other drug abuse.
6. To assist school guidance counselors.
7. To survey and document alcohol and other drug usage among New Zealand teenagers.
8. To concentrate on primary prevention of alcohol and other drug abuse, particularly among adolescents.
9. To prepare teenagers for their introduction to drugs by introducing them to the "Saying No" techniques.
10. To recognize the importance of peer pressure by attempting to reverse the current trend and make the use of illegal drugs unacceptable to the majority of teenagers.

FADE laid claim to five areas of responsibility: 1) the production of educational materials, 2) assistance to schools, 3) communication to the public, 4) the development of primary prevention strategies, and 5) the documentation of alcohol and other drug use among New Zealand teenagers. At this time other alcohol and drug related agencies saw themselves as already involved in some or all of these activities.

Initially all FADE work was voluntary. Those prepared to devote much time joined the board of directors. Others formed a board of trustees. An initial seminar sponsored by FADE to highlight prevention and the nature of alcohol and other drug problems attracted a number of teachers and social workers interested in alcohol and other drug education. Not all were supportive of FADE's intentions. The press coverage generated by FADE's formation and by this seminar was considerable. Requests for assistance from individuals, schools, and parents began almost immediately as did offers of financial assistance. A full-time paid staff position was created, then a second and a third. Programming and fund-raising increased proportionately.

Private and public agencies already engaged in alcohol and other drug education/prevention activities generally responded negatively to FADE's high visibility approach. The notion of a grass roots organization, no matter how well intentioned, succeeding in this area was greeted with skepticism. The organization was seen as naive and ill prepared to deal with an area that the established groups saw as their own, very complex territory.

A significant sector of the public, however, responded positively to vigorous, new, charismatic leaders offering solutions to problems that were not seen as being addressed by the existing agencies created to solve such problems.

FADE continued to expand its scope. It became the sponsor for the Parent-Peer movement and the New Zealand representative for the Australia-based Life Education Centers, exhibit-based health education centers supported by mobile displays. Both these organizations would ultimately become free-standing groups, independent of FADE.

FADE initiated and completed a major survey of a 10% sample of New Zealand high school students to document the nature and extent of alcohol and other drug problems among adolescents. As part of its school-based initiatives it developed and promoted wide use of classroom teaching resources and initiated teacher training programs.

To support its school initiatives a videotape aimed at helping parents deal with alcohol and other drug abuse by their children was developed, widely aired and distributed nationally.

By 1991 FADE's development strategies called for:

1. School/community initiatives: continuation, fine-tuning and further development of current FADE educational and training resources.
2. Development of a youth leadership in drug education program.
3. Development of a parenting, teenagers and drugs education program.
4. Development of drugs in sport initiatives.

Tensions and their Effects

Tension between individuals and groups is usually thought of as harmful. Tension needs to be reduced before something breaks or is damaged. Tension is usually considered detrimental to health. Human service agencies in particular may tend to abhor tension, seeking harmonious relations, sometimes at any cost.

Tension provides the needed energy for movement. Its dynamic nature can be used creatively to generate movement in new directions. Tensions create a reaction only when they are strong enough to overcome stability or inertia. Tensions by their very nature therefore may create discomfort.

The development of FADE is a case study in tensions. It appeared that FADE, as an organization, went out of its way to create tension, something many saw as negative, and certainly not as creative. This paper identifies some of these tensions and speculates on their value to the overall effect to enhance alcohol and other drug prevention activities in New Zealand.

It concludes that health educators and community workers are often quick to react negatively to new ways of dealing with old problems. They may themselves contribute to potentially damaging aspects of tensions by their intransigence. Similarly, those whose aggressive ways lead to tensions may also slow change by allowing their efforts to be neutralized. Overall, however, we suggest that the creative use of tension is worth studying and worth using within any responsive profession, and not one that should be dismissed easily as is often the case.

In the pages that follow we describe examples of significant tensions in the development of FADE and suggest the benefits that resulted from these tensions.

Sharing turf

It is ironic that a frequent obstacle to responding to community problems is the question of who is the best to respond. The matter is complicated further when the government and other established organizations assumed to be the principal policy makers and leaders are seen by some to be unresponsive. FADE was founded out of frustration with this lack of responsiveness.

Two options were available to FADE. The first, was to negotiate a role, perhaps supportive and/or subservient, with existing organizations, the logic being that coopting support from other agencies and minimizing threat would eventually lead to a meaningful relationship allowing the new organization to exert pressure for change. The second option was to ignore the other agencies, stake out a set of objectives and begin to work on achieving them. Dissatisfaction with the activities of the other agencies or simply not knowing their activities is the motive for this approach.

It may be typical of new organizations formed in reaction to the perceived inactivity of existing organizations to choose the second option. FADE chose to state its objectives publicly and to begin work independently.

The existing alcohol and other drug agencies responded immediately. Unaccustomed to the tension created by FADE's accusations of inactivity, they countered with accusations of their own. FADE was criticized for its unrealistic objectives, its ignorance of the nature and extent of problems, its ignorance of the activities of existing programs, and its "general irresponsibility" for not having first contacted and negotiated with "experienced players in the field."

The antagonism and distrust generated by its approach meant FADE was isolated from the mainstream organizations and subject to efforts to discredit its activities. This approach also isolated FADE from the traditional sources of financial support.

So what were the benefits?

By choosing to ignore other agencies FADE benefited from the attention received by any radical new approach: people talked about it. The benefit was visibility for the organization and increased public recognition for their issue--alcohol and other drug abuse, a topic of deep concern to the public. With their aggressive approach, FADE also played on one aspect of the New Zealand national character: a love for the independent, pugnacious underdog. Beneath the British style civility is still the colonial characteristic that values and respects pioneers, those who strike out along different paths against long odds.

A second immediate benefit was the flow of financial support. FADE's apparently simple and straightforward approaches to a difficult and feared problem generated financial support. While effectively isolated from the traditional sources of money, FADE appealed to alternative sources never before successfully tapped. Rather than splitting existing dollars with one additional agency, FADE added new sources of dollars to support alcohol and other drug programs, a net gain for all.

FADE's public recognition, extensive press coverage, and financial support certainly gained the attention of all the other service providers. The very tensions created by the other drug and alcohol agencies helped propel FADE into the public's view. FADE's identity was immediately established. Even while leveling accusations against FADE, the traditional agencies were helping its definition as a "different" organization, a key factor in its later development and public acceptance. This difference was noticed by the press who provided considerable coverage to the new organization and its activities.

Program priorities--tension in the principal constituency

Following its formation FADE responded to a significant number of requests from schools for educational programs. School officials wanted speakers knowledgeable about alcohol and other drugs to speak to their students and occasionally to parents. FADE provided speakers for assemblies and other large audiences. The objective was to provide basic information to students, raise the visibility of the alcohol and other drug issue, and help the school officials respond to what was they felt their responsibility. While meeting a basic need, FADE's speakers tended to be dramatic and colorful, boldly capturing the attention of a large audience while stirring controversy. They used scare tactics, cited personal experiences and suggested specific strategies related to prevention.

The benefits?

By responding quickly to requests for programs FADE encouraged more requests. By providing one-time, highly visible, provocative programs, FADE implanted the idea that the schools needed to respond further in their own ways. Unrecognized by school officials, and maybe even by FADE, in the earliest stages, these programs left the school facing two alternatives: to congratulate themselves on having FADE meet their drug and alcohol education responsibilities or to admit that they should be doing more.

FADE's approach and reputation often generated media coverage for a school's programs. The provocative drama of the FADE presentations played to parental concerns about alcohol and other drugs. Often parents encouraged the school to resolve the tensions by expanding alcohol and other drug education.

Throughout this time, FADE was criticized for what New Zealanders call "one offs": one-time programs with no apparent follow-up. However, tensions created in the wake of these "one offs" forced schools and parents to begin to deal specifically with their own local problems.

The Media

From its inception FADE courted the media. They saw the media as helping achieve their objective to publicize the dangers of alcohol and other drug abuse. This led to at least two potentially creative (or alternatively, potentially dangerous) tensions. The first was increasing the existing tension with other agencies who chose to work with a lower profile. The second, perhaps more dangerous, was the tension that had to be maintained to sustain the interest of the media. Initially, new programs in new locations excited local media. However, since the press needs continuing controversy, excitement and news to sell their products, sustaining press interest meant FADE had to identify new ways to tell an old story. The press reinforced FADE's contentious approach, because to become more traditional would be to risk losing media interest.

Growth, growth and more growth

The previous three sections described the tensions between FADE and others. This section describes the outcome of tensions within FADE itself. FADE grew. One, then two, then three full-time staff were added. Fund-raising and programming expanded. FADE became the New Zealand base for the Life Education Centers of Australia. FADE was the base for the first New Zealand Parent-Peer Organization. Branch offices were established in other cities. Offers of financial support continued and other fund-raising efforts expanded. Program initiatives expanded. Growth exceeded management's ability to sustain a unified organization.

The Life Education Centers separated and became a viable organization in its own right further expanding its activities. The Parent Peer group became the New Zealand branch of PRIDE International. This break-up was seen by many as the demise of FADE, perhaps the result of so many destructive tensions.

Viewed another way, however, the reasonably harmonious launching of two new and viable organizations, each of which was dedicated to objectives that supported FADE's own and those of all the other existing alcohol and other drug prevention organizations, was not destructive at all.

In this process of constructive break-up FADE reassessed its own role and focussed its efforts on developing educational materials for schools to use to address the need that FADE had originally helped to identify. FADE also launched teacher preparation programs to assist schools to use their materials and to provide better alcohol and other drug education efforts.

Confronting Denial

FADE sponsored the largest survey of alcohol and other drug use ever undertaken in New Zealand, polling 25,000 teenagers--ten percent of the New Zealand high school students. The results were released in a report entitled *The Gathering Storm*. Widespread media coverage invoked denials of the accuracy of the results by some and confirmation of suspicions by others. The Prime Minister and several cabinet members and other high government officials commented on the report.

The results estimated nationwide alcohol and other drug use for the first time. The survey results were never fully analyzed for the large amount of information they could have provided. Again the benefit was from the tensions created by the release of the results. Again FADE thrust alcohol and other drug abuse problems to the forefront of public debate by means of the press. The resulting interest benefited all organizations working on this problem. Movement beginning in program development and policy reviews in all allied organizations was given an added push.

FADE used the survey results to direct its own efforts to develop teaching materials for the schools and to focus the development of its teacher training activities.

Transition

FADE had become a force that nobody could ignore. The organization was a success. Nobody could deny that. Failure of the traditional organizations to accept FADE was not difficult to explain.

With time, transition in leadership and further definition of scope were inevitable. The tensions created by these transitions provide yet another challenge.

FADE is beginning to be seen by some as an organization separate from its founding leadership. A new and very real set of tensions now must be addressed. These are in effect the results of decreased tension of the type that was originally associated with FADE. The new leadership describes FADE as becoming a more conciliatory and less confrontational organization, still dedicated to direct approaches to the problem of alcohol and other drug abuse.

Without controversial leadership the contentious style is gone. The redirecting of program efforts along more traditional lines may mean less visibility for FADE, especially in the media. The possibility of access to traditional sources of financial support may mean blending into the mainstream and becoming the type of organization that FADE challenged by its original formation. Assimilation could mean less financial support from those who were originally inspired to support a challenging, upstart organization.

Conversely, FADE's evolving image of conciliation and accommodation may mean it is welcomed by the traditional agencies and funding sources as an organization that has shown its ability to develop effective programs.

Conclusion

In six short years, FADE moved from conception to adolescence to early maturity. The raw energy expended in that development antagonized many people. In retrospect

however much can be learned from these events. FADE was in fact propelled in its development by the antagonism and isolation of the traditional service providers. The careful use of raised expectations and high visibility created tensions that forced others to provide services sooner than would otherwise have occurred. The potentially destructive growth that led to splits within the organization led to the launching of new and vital organizations. The release of survey data that shocked many people with its results helped sustain often too short-lived public attention. Finally the maturing of the organization leaves a new generation of unanswered questions.

How long will the values of separateness last? Can a separate identity be maintained while effecting cooperation with the other alcohol and other drug prevention agencies? Will the lure of financial support from traditional sources such as the government lead to a purchased accommodation?

FADE in New Zealand, like similar independent and initially unconventional groups with narrowly defined missions, like MADD (Mothers Against Drunk Drivers) in the U.S., deserves careful study of the reasons for its successes.

Because FADE was founded by individuals unrestrained by preconceived notions associated with experience or professional community health education training, they provided new approaches to old problems. Learning from these new approaches can expand the body of knowledge of health education practice. This examination of tensions illustrates the potential value of exploiting a strategy that would normally be discouraged by more conventional practitioners. By recognizing tensions for what they are, dynamic and creative forces, we have seen examples of how they effect change in positive and dramatic ways.